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USANZ Board of Directors and Committees 2018

USANZ Board of Directors
Peter Heathcote: President, Northern Section Representative
Stephen Mark: Vice-President, New Zealand Section Representative
Mark Frydenberg: Past-President, Honorary Secretary, Honorary Treasurer, Victoria Section Representative, RACS Urology Specialty Representative
John Miller: South Australia / NT Section Representative (appointed 24 February 2018)
Kim Moretti: Policy Chair, South Australia / NT Section Representative (ceased 24 February 2018)
Stuart Philip: Chair, Board of Urology (appointed 24 February 2018)
Mellyn Kuan: Chair, Board of Urology, WA Representative (ceased 24 February 2018)
Jeff Thavaseelan: WA Section Representative (appointed 24 February 2018)
Stephen Brough: Tasmanian Section Representative (appointed 24 February 2018)
Frank Redwig: Tasmanian Section Representative (ceased 24 February 2018)
Karen McKertich: Chair, ANZAUS
Tyron Carlin: External Director
Mohamed Khadra: New South Wales Section Representative

USANZ Investment Committee
Mark Frydenberg: Chair / USANZ Treasurer
Tyron Carlin: USANZ External Director
Andrew Brooks: USANZ Board appointee

USANZ Society Awards
Nominations Committee
Mark Frydenberg: Chair / USANZ Past-President
Stephen Mark: Vice-President
Mohamed Khadra: USANZ Director

Registry Implementation Committee
Stephen Mark: Chair
Mark Frydenberg
David Winkle
Simon Wood

Special Advisory Group (SAG) Leaders
Eric Chung: Andrology
John Kourambas: Endourology
Vincent Tse: Functional and Female Urology
Peter Chin: Male Lower Urinary Tract
Shomik Sengupta: Genitourinary Oncology
Grahame Smith: Paediatric and Reconstructive Urology

Mesh Sub-committee
Caroline Dowling: Chair
Peter Chin
Peter Heathcote
Karen McKertich
Michael Nugara
Prem Rashid
Vincent Tse
Jessica Yin

USANZ Staff 2018
Michael Nugara: Chief Executive Officer
Madeleine Bennison: Governance & Secretariat Coordinator
Katie Cook: Accounts Officer (part-time)
Nick Danes: Chief Operating Officer (USANZ and ANZSCTS)
Kirsten Isaac: Training Administrator (part-time)
Deborah Klein: Education & Training Manager
David Muranty: Financial Controller (commenced October)
Vaughan Parkinson: Chief Financial Officer (finished September)
Anna Tartakovskaia: Conference Manager

Back row from left to right: Stephen Brough, Tyron Carlin, Mohamed Khadra, John Miller, Stephen Mark
Front row from left to right: Karen McKertich, Michael Nugara, Peter Heathcote, Mark Frydenberg, Stuart Philip, Jeff Thavaseelan

Vision
The Society’s vision is to continue to work for its community to ensure the best access to the quality urological care its members provide.

Mission
The Urological Society of Australia and New Zealand is committed to clinical excellence, education, and the promotion of research and the dissemination of information on urological topics for the benefit of the community.

Values
- Excellence in professional standards
- Ethical standards of the highest order
- Patient safety
Dear colleagues and friends,

It is with a mixture of pride and sadness that I present this report to you, my final time to address you as President of USANZ. The highlights of last year were the completion of the Board Charter, Strategic Plan and improved governance education for directors.

Since then we have built on these foundations and, also, I am pleased to confirm the establishment of our Investment Committee which will manage the Society’s investments with the long term goal of achieving financial independence. Late last year we held a strategy day with our Special Advisory Group (SAG) leaders. The Board of Directors believes that SAGs play a critical strategic role within USANZ and their input is central to delivering more than half of the planned strategic objectives. The Board is exploring an improved structure to foster active involvement and closer and more frequent interactions between the Board and the SAGs; this may include the development of scientific input to our website and patient information resources in addition to their existing role in advising the board on specific scientific matters.

Thank you to everyone who responded to the membership survey. Members gave a thumbs up to NetWit, BJUIK, and EAU group membership and indicated an interest in AUA membership. We will explore the costs and benefits of providing this for everyone.

The AUF has approached USANZ regarding funding SIU group membership for USANZ members. The USANZ Board is considering this offer and will be discussing this further with the AUF in 2019; in the interim, any queries regarding this matter should be directed to the AUF Chair, Michael Rochford or the SIU membership office rather than the USANZ office.

Our international reach continues, with the USANZ / BJUI / BAUS joint session at the AUA in May. Also, we are holding the inaugural joint EAU/USANZ satellite session at the EAU in Barcelona in March 2019. Our connection with Asia is developing, and USANZ will host the Urological Association of Asia Congress 2021 in Sydney. Congratulations to Michael Nugara and his Secretariat, to David Winkle, convenor, and Henry Woo, scientific convenor.

We continue to engage with Movember and PCFA in the prostate cancer space. Binational urological participation in PCOR ANZ continues to grow. We are planning to develop a national GP education program based on the PCFA CCA position statement on PSA in the early detection of prostate cancer. Ian Vela kindly represented USANZ at the Parliamentary Friends of Cancer Causes Group Bladder Cancer Event. I strongly encourage members’ active participation and partnership with these broad-based community organisations.

Audit and Quality Assurance continue to be a focus of USANZ activity. The PCOR ANZ Registry is well known, and the pilot Nephrectomy Audit continues. Additionally, Caroline Dowling expertly represented USANZ during the “Senate Inquiry into the number of women in Australia who have had transvaginal mesh implants and related matters (the Urogynaecological Mesh Inquiry)”. Monash University has developed a proposal to establish a Pelvic Surgery Registry to help address issues associated with pelvic mesh procedures. The proposed Registry aims to create the infrastructure to ascertain the number, type, and outcomes of pelvic reconstructive procedures, including those involving the use of mesh. The initiative aligns with the Senate Inquiry findings, recommendations of the Australian Commission on Safety and Quality in Health Care (ACSQHC), and complements changes within the Therapeutic Goods Administration (TGA) framework and further planned reporting changes with TGA. I want to personally thank members of the FUSAG for their energy and commitment to position Urologists and USANZ front and centre in this space. On behalf of USANZ, I have written to
AMNIAL REPORTS

Professor John McNeill, the lead at Monash giving in principle support and offering our expertise to this registry emphasising the need for clinical leadership and involvement. USANZ, via the FUSAG, has also endorsed the RACS response to the Senate Inquiry. Our engagement with RACS remains fruitful and continues to improve, and I am pleased to advise they have made substantial revisions to the troublesome Variance Reports previously published in conjunction with Medibank. Following several meetings with Medibank, Mark Frydenberg and I are close to presenting a much modified, scientifically robust framework for data presentation to the Board of Directors. Individual clinician’s data will not be publicly distributed and will only be released exclusively to each clinician upon request. There will be no linkage between financial and clinical data.

I would like to sincerely thank the USANZ Board members for their support and wise counsel during my tenure. The Secretariat continues to work tirelessly for us, and I am always struck by how USANZ centric our people are. I am pleased to report that we renewed Michael Nugara’s CEO contract this year; Michael is a fearless advocate for USANZ, and I thank him and the staff of USANZ for their hard work.

USANZ is in great hands. Mark Frydenberg has been an invaluable support, and I wish Stephen Mark every success as he takes over the reins of the peak professional body for Urologists in New Zealand and Australia.

Chief Executive Officer’s Report
Michael Nugara

The Board implemented a new strategic plan in 2018 and it includes 26 initiatives grouped under four goals. These goals comprise Member Services, Relationships and Advocacy, Enhance Care to Patients, and Efficient and Effective Organisation. The 2018 Board planning day focused on further defining the initiatives to identify priorities and consider high level performance indicators to measure progress against our goals. While progress has been made across all four goals as outlined below, we are developing a reporting structure to efficiently track progress and plan to have this implemented later this year.

Relationships and Advocacy

In April, USANZ was successful in securing the hosting rights to the 2021 Urological Association of Asia (UAA) Congress, to be held in Sydney from 4 to 7 August. Securing the hosting rights was a highly competitive process where USANZ was one of seven nations bidding. Achieving this outcome was a significant milestone which was the culmination of building our profile and reputation within the UAA over many years. Successive Presidents have all contributed to this and coupled with demonstrating our capability to deliver world-class ASMs, where many UAA Executive members and member nation presidents have attended, this puts us in a very strong position. I would like to acknowledge the contribution of David Winkle who has worked to build our reputation over many years and currently serves on the UAA Council as International Committee Chair.

The MBS Review required a significant amount of work by the SAGs and members during the year. The Urology Clinical Committee Report was finalised in late 2018 and submitted to the Review Taskforce. A number of issues remain unresolved including the “three item number” rule and the possibility of reduced rebates for TRUS biopsies. Work will continue in 2019 to ensure the interests of our members are effectively represented.

Following the execution of the Memorandum of Understanding (MoU) with the Korean Urological Association (KUA) in 2017, a delegation of KUA members attended the ASM in Melbourne. A joint symposium was held during the ASM. USANZ, with the support of Industry, had representation at the KUA meeting in Seoul in November and participated in a joint international session. At the 2019 ASM we look forward to welcoming another KUA delegation and hosting the USANZ and KUA Symposium. Our relationship with the KUA continues to strengthen and we look forward to this continuing into the future.

The 2018 ASM, held at the Melbourne Convention and Exhibition Centre (MCEC) was a great success. The quality of the local and international faculty and standard of science and diversity in the program were well received by the delegates. This trend of delivering a world-class ASM and positioning it as the premier event in our region has had a positive effect on attendance where a new record was set with the delegate headcount exceeding 1000.

After convening a very successful 2017 ASM, Nathan Lawsentzschuk generously stepped into the Convenor role to assist Scientific Program Director, Declan Murphy. Their combined efforts generated a world-class scientific program and memorable social events, we thank them for their contribution. Much of the success of the ASM is also attributable to the former USANZ Events and Communications Manager, Jan Shaw, who worked tirelessly to deliver a great event.

USANZ endorsed the Australian Consensus Framework (ACF) in August 2018. The ACF is an initiative to establish a consensus statement of shared values and ethical principles for collaboration within the health sector. This initiative is led by the Australian Orthopaedic Association, Medicines Australia, Medical Technology Association, Australian Healthcare and Hospitals Association and the Department of Health. USANZ was invited to participate in this initiative which includes representation from 46 organisations across the health sector. The goals of the ACF are to:

- Promote collaboration and interaction among healthcare sector organisations that benefits patients, consumers, communities, populations, healthcare systems and the healthcare sector.
- Encourage better dialogue, trust and respect between and amongst organisations in the healthcare sector.
- Enhance the integrity and trustworthiness of organisations in the healthcare sector.
- Promote public confidence and trust in healthcare sector organisations by demonstrating a shared commitment to integrity and ethics.

Work on the implementation of the Framework commenced in early 2019.

A review of the memorandum of understanding between USANZ and the Australia and New Zealand Urological Nurses Society (ANZUNS) commenced in 2018. The review was timely in light of the increased engagement between the organisations in recent years. ANZUNS is an important partner in the delivery of the highest standards of patient care and USANZ will continue to support ANZUNS through current endeavours. We look forward to finalising the revised MoU in 2019.

USANZ is currently developing a service agreement with a view to formalising the provision of support services to the Australasian Urological Foundation (AUF). USANZ recognises the importance of preserving the independence of the AUF and is confident it will be able to assist the AUF to operate more efficiently and with enhanced levels of communication and accountability. Recently the AUF entered into an agreement with the SIU to fund group membership for USANZ members. USANZ is not a party to the agreement and the Board resolved to address issues it raises in relation to obligations placed on USANZ, in the context of the proposed service agreement. Members who may have any queries regarding SIU membership should contact AUF Chair, Michael Rochford or SIU membership office.

Member Services

In June 2018 the membership was surveyed to obtain feedback on a number of issues that informed the Board and will influence the direction of the organisation. The findings of the survey were circulated to the membership in September and provided valuable insights for the Board. While some actions have been implemented, others are either under consideration or in the planning process. It was pleasing to note that 42 percent of members who were targeted, completed the survey.
Progress with the implementation of the Nephrectomy Registry has continued and it is pleasing to note that the pilot stage of this project commenced in 2018 and patient records are being entered into the database. There are some centres who expressed interest in participating in the registry pilot who are yet to finalise their local ethics approval and once in place, we will welcome the entry of their patient data. Getting to the stage where we were able to enter patient records has required an enormous amount of work and I would like to acknowledge Simon Wood for his efforts in this regard. Simon, along with our external consultants, Jayde Archer and Julie Holland have demonstrated great patience and commitment to getting the pilot study operational.

In 2018 the Board of Urology (BoU) continued their outstanding work in the administration of the training program. The Society is grateful for the considerable effort by the BoU and the Regional Training Committees. Under the leadership of Stuart Philip, members of the BoU sacrifice their personal time in the pursuit of continuous improvement in the training program for the benefit of the next generation of urologists. The BoU and those involved with the Training program have received exceptional support from Deborah Klein, Education and Training Manager and Kirsten Isaacs, Training Administrator. Two highly driven individuals who are passionate about the development and delivery of the best possible training program.

It is important to note that there is a significant cost associated with delivering the urology training program. The Board of Directors has maintained its policy that the fee charged to trainees (for the USANZ component of the fee) will be on a cost recovery basis. Whilst there have been significant fee increases in recent years, the Board resolved in 2018 that in order to give trainees certainty, fees will be indexed by CPI on a three year cycle and a fee review will be carried out thereafter. However, in the event of any significant change that will have a material effect on the cost of training, there will be a mechanism for a mid-cycle review.

Trainee Week was held in Fremantle in 2018. The Convenor, Jenny Kong did an outstanding job and was well supported by Deborah Klein, who along with Kirsten Isaacs, ensured the meeting logistics were well executed. Over the years Trainee Week has developed an outstanding reputation both amongst our trainees and international guests. It is through the commitment of the BoU, Deborah, Kirsten and the convenors that this has occurred.

Efficient and Effective Organisation

During 2018 work continued on improving the Society’s governance; this included the development of new policies as well as reviewing and updating existing policies. A significant undertaking was the development of the Privacy Framework, Policy and Data Breach Response Plan. Other policies developed during the year addressed representation on external committees, delegation of authority, membership discounts, office bearer allowances and policy framework. These policies and others can be found on the Society’s website. Work will continue in this area in 2019 and I would like to acknowledge the enormous contribution by our Governance and Secretariat Coordinator, Madelene Bennison; her expertise and counsel has been greatly appreciated. Following the Board approval in late 2017 to procure a new business system, implementation work commenced in early 2018. An enormous amount of work has been carried out during the year across all aspects of the business. The new platform will replace existing systems and provide a fully integrated system improving efficiencies not only for staff, but also for members to update details, pay subscriptions and register for events. The system will be visible to members phased in gradually starting in 2019 and the rollout continuing into 2020. This project requires a substantial contribution by all the staff and it is pleasing to see the enthusiasm amongst the team.

The 2018 Annual General Meeting (AGM) will be held during the 2019 ASM and will be followed by a meeting of the Board of Urology (BoU) and Regional Training Committees. A Section Chairs meeting will be held during the 2019 ASM and a follow up meeting later in the year. This is part of the Board’s strategy to improve communication and engagement with the Sections.

2018 was a very busy year for USANZ and the intensity has only increased in the early stages of 2019. The USANZ office comprises a small team, yet the ever increasing volume of work churned through and the commitment demonstrated by each staff member day after day, often goes unnoticed by the membership. I would like to express my sincere thanks to an outstanding team who have contributed enormously to the continued success of USANZ.

I wish to acknowledge the work carried out by the other members of the Board of Directors, they are a highly committed group of individuals who sacrifice their personal time for the benefit of USANZ. It has been a pleasure to work with the Board and I look forward to this continuing under the leadership of Stephen Mark.

The repackaging of our external director, Prof Tyrone Carlin, for a new term on the Board was warmly welcomed in late 2018. The Board is fortunate to have Tyrone’s skills, insights and counsel at its disposal. I would like to express my thanks to Tyrone for his commitment to USANZ and we look forward to his continued contribution.

Following the inaugural meeting of Section Chairs in late 2017, a follow up meeting was held during the ASM in February 2018. Sections have improved planning for Section Meetings to bring the budget preparation process into line with the organisational budget. This included bringing forward the appointment of 2019 and 2020 Section Meeting Convenors. 2019 will be a transitional year with the budget preparation process for 2019 meetings due for completion by 31 March and 2020 meeting budgets due by 31 August 2019. A Section Chairs meeting will be held during the 2019 ASM with a follow up meeting later in the year. This is part of the Board’s strategy to improve communication and engagement with the Sections.

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Secretary’s Report 2018
Mark Frydenberg

The Board of Directors of the Society met during 2018 as follows:

- 25 January 2018 – Teleconference
- 23 February 2018 – Melbourne ASM, Victoria
- 5 May 2018 – USANZ Office, Sydney
- 18 August 2018 – USANZ Office, Sydney
- 3 November 2018 – Teleconference
- 24 November 2018 – USANZ Office, Sydney
- 12 December 2018 – Teleconference

The USANZ Constitution identifies the following Director roles and tenure periods.

- President: 2 terms of 1 year each
- Vice-President: 2 terms of 1 year each
- Past-President / Honorary Treasurer / Honorary Secretary: 2 terms of 1 year each
- ANZAUS Chair: 2 terms of 3 years each
- Board of Urology Chair: 1 term of 2 years
- Specialty Elected Royal Australasian College of Surgeons Councillor (RACS Councillor): 3 terms of 3 years each
- Sectional Representatives: 2 terms of 3 years each
- 2 x External Directors: 2 terms of 3 years each

Membership

Since the last Annual Report, the following changes have occurred:

**Full Member**
Ranjan Arianayagam
Richard Cetti
Jonathan Chambers
Jonathan Cho
Sarath Chopra
Kyle Gallagher
Kieran Hart
Nicola Jeffery
Wai Gin Lee
Heath Liddell
Shuo Liu
Sum Sum Lo
Nicholas Mehan
Shiva Nair
Anuradha Ranasinghe
Louise Rouse
Kapil Sethi
Matthew Stanowski
Michael Vincent

**Full Member Senior**
Laurence Clevee
Raymond Que Hee
Peter Langdon
Robin Smart
Michael Vaughan

**Provisional Member**
Rajinda Singh Rai

**Corresponding Member**
Wei Tim Loke

**Trainee Member**
Mohit Bajaj
Ross Calopedos
Daniel Chi
Wilson Choi
Sing Ken Chow
Daniel Christidis
Andre Joshi
Jonathan Kam
Munad Khan
Ned Kinnear
Todd Manning
Anton Mare
Shannon McGrath
Amit Patel
Lana Pepdjonovic
Alison Rutledge
James Sewell
Muazzam Naim Tahir
Cristian Uzdovic
Yang Gang Wang
Luke Wang
Marianna Zukiwskyj

Cessation of Membership
John Alexander (FMS)
Akbar Ashrafi (FM – Overseas)
Daman Bhatia (TM)
Ralph Cohen (ASM)
Kate Creed (ASM)
Hamesh Jina (TM)
Richard Nugent (FMS)
Woon-Kai (Kevin) Ong (TM)
Peter Petros (AMM)
Rodney Syme (FMS)
Christian Uzdovic (TM)
Alastair Vetch (ASM)

Deaths
Daniel Christidis
Terrence James Farrell
Robert Darlow Smith

Awarded Fellow of the Society
Nil

Awarded Honorary Membership of the Society
Nil

Associate Urological Member
Nil

**USANZ Membership by Classification**

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<th>Dec-18</th>
<th>Dec-17</th>
<th>Dec-16</th>
<th>Dec-15</th>
<th>Dec-14</th>
<th>% Inc (Dec) since 2014</th>
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<tbody>
<tr>
<td>Full Members, Fellows &amp; Associate Urological Members*</td>
<td>493</td>
<td>490</td>
<td>491</td>
<td>482</td>
<td>443</td>
<td>11%</td>
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<tr>
<td>Full Member Seniors</td>
<td>75</td>
<td>77</td>
<td>84</td>
<td>84</td>
<td>89</td>
<td>-16%</td>
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<tr>
<td>Provisional Members</td>
<td>4</td>
<td>4</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>33%</td>
</tr>
<tr>
<td>Trainees</td>
<td>106</td>
<td>106</td>
<td>111</td>
<td>111</td>
<td>113</td>
<td>-6%</td>
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<tr>
<td>Associate Scientific Members</td>
<td>21</td>
<td>25</td>
<td>25</td>
<td>31</td>
<td>32</td>
<td>-34%</td>
</tr>
<tr>
<td>Other*</td>
<td>37</td>
<td>25</td>
<td>25</td>
<td>28</td>
<td>31</td>
<td>19%</td>
</tr>
<tr>
<td>Total Members</td>
<td>736</td>
<td>727</td>
<td>739</td>
<td>737</td>
<td>711</td>
<td>2%</td>
</tr>
</tbody>
</table>

* During 2018, 12 Full Members who are now residing overseas permanently were reclassified as Corresponding Members as they no longer met the constitutional requirements for Full Member status
As in previous years, event expenses were a significant factor in the final result. The 2018 ASM was held at the Melbourne Convention and Exhibition Centre and was a great success. Investment income declined in 2018, primarily due to more significant exposure to share market volatility through the recently established investments in exchange-traded funds as well as reduced interest earnings on term deposits.

**Operations**

USANZ generated an operating surplus of $401,546 for 2018. This result is less than last year’s surplus of $589,741 by $188,194 and suggests that while USANZ enjoyed modest total revenue growth, it also experienced increased operational costs during 2018.

ASM 2018 total revenue was $1,927,376, which was $276,377 greater than ASM 2017 total revenue of $1,650,999. ASM 2018 total expenses of $1,373,654 were $142,378 higher than ASM 2017 total expenses of $1,231,276. The 2018 ASM returned a surplus of $553,721, which was $133,998 greater than the 2017 ASM result, largely due to increased sponsorship, record attendance, and coupled with efficient management of the event. The 2018 ASM demonstrated USANZ’s commitment to delivering a world-class event and forum for presenting scientific content. USANZ is likely to face similar venue, accommodation, and travel costs with the 2019 ASM being held at the Brisbane Convention Centre.

2018 total revenue increased by $49,375 from the 2017 result. This modest increase is attributable to a variety of factors. Revenue from operating activities decreased by $34,057. Section revenues declined by $81,847, and investment revenues were $111,096 lower in 2018. The strong ASM revenue growth of $276,377 was the most significant factor in the final result.

As in previous years, event expenses were managed, and scaled, in line with changes in membership and other debtors, which has reduced the level of doubtful debts carried at the end of the 2018 balance date. There was a significant write-down of the provision for doubtful debts of approximately $42,000 during 2018 due to successful management of membership and other debtors, which has reduced the level of doubtful debts carried at the 2018 balance date.

Office and Administration costs

Office and Administration expenses increased significantly in 2018 and were $342,996 higher than in 2017. Contributing factors included the engagement of consultants and other contractors providing expertise and advice with various projects, casual staff, as well as increased uptake of member benefits (EAU and BJUI Knowledge subscriptions), purchase of new client management system and legal costs.

**Financial Position**

In 2018 USANZ continued close supervision of its cash management accounts. Non-interest bearing operational bank accounts were funded only when needed so that residual cash remained in Australian interest-earning bank accounts until required. The value of USANZ’s market-linked portfolio investments and exchange-traded funds decreased over the 2018 year due to short-term unfavourable market valuations. Total assets increased from $14,451,768 to $15,061,149 to $2,173,731 reflecting a reduction in other liabilities, including accruals, unearned income and advance ASM revenues.

The total liabilities decreased from $2,412,693 to $2,276,377, reflecting a reduction in other liabilities, including accruals, unearned income and advance ASM revenues.

The current asset/liability mix (the Society’s ability to meet short term commitments) remained strong with greater than six times coverage. The Society has always maintained a strong current asset/liability mix, and this is expected to continue.

**Cash Flow**

Net cash from operating activities decreased by $141,651 in 2018. Cash held at the end of the financial year totalled $10,561,149.

**Overall**

Members should be pleased with the 2018 performance, supervision and accountability of the USANZ management team. USANZ has an ongoing mission to sustain the quality and delivery of its events, and particularly the flagship ASM. USANZ faces the challenge of continuing to attract financial support from industry in a competitive market, already saturated by other groups seeking financial support from industry in a competitive market environment, and possibly further volatility in 2019. The Investments Committee will continue to monitor the portfolio with a view to ensuring capital security but also improving investment returns from its investable assets.

USANZ will continue its policy that member subscriptions will be adjusted to take account for the consumer price index. Cost growth is expected to be contained in line with CPI trend in overall terms. However, it should be noted that USANZ cost structures are also under stress from adapting to a changing market place and operational demands.

I would like to take this opportunity to acknowledge Michael Nugara, Nick Danes, Vaughan Parkinson and David Muranty (since recently taking over from Vaughan Parkinson) for their contribution in 2018 and the rest of the USANZ staff for their support during the year.

In 2018 USANZ continued its funding of member benefits and initiatives, including EAU membership, BJUI Knowledge; and further development of the Urological Surgery Registry. USANZ investments income performance is still subject to the market environment, and possibly further volatility in 2019. The Investments Committee will continue to monitor the portfolio with a view to ensuring capital security but also improving investment returns from its investable assets.
Your directors present their report on The Urological Society of Australia and New Zealand (the Society) for the financial year ended 31 December 2018.

The profit of the Society for the financial year was $401,546.92 ($589,741.82 - 2017)

The Society is exempt from payment of income tax under section 23(e) of the Income Tax Assessment Act.

The principal activities of the Society during the year were the advancement of the science of urology through the promotion and finance of research in urology and the bringing together of urologists of Australia and New Zealand to cultivate and maintain the highest principles of urological practice and ethics.

The Society is also responsible for the selection, training and assessment of urology registrars according to the Memorandum of Understanding with the Royal Australasian College of Surgeons.

No significant change in the nature of these activities or the Society's state of affairs occurred during the year.

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the society, the results of those operations, or the state of affairs of the Society in future financial years.

The Society expects to maintain the present status and level of operations and hence there are no likely developments for reporting.

The Society is a not for profit entity limited by guarantee and is therefore prohibited from declaring any dividends.

The Society’s operations are not regulated by any significant environmental regulation under a law of the Commonwealth or of a state or territory.

During the year the Society has paid insurance premiums for Directors’ Liability.

No person has applied for leave of Court to bring proceedings on behalf of the Society or intervene in any proceedings to which the company is a party for the purpose of taking responsibility on behalf of the company for all or any part of those proceedings.

The Society was not a party to any such proceedings during the year.

Auditor’s Independence Declaration

A copy of the auditor's independence declaration as required under section 307C of the Corporations Act 2001 is set out on the following page.

Signed in accordance with a resolution of the Board of Directors.

On behalf of the Board of Directors:

[Signature]

President

dated 23 February, 2019
The Urological Society of Australia and New Zealand
ACN: 000 069 376

Directors’ Declaration

The directors have determined that the company is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies described in Note 1 to the financial statements.

The directors of the company declare that:

1. The financial statements and notes are in accordance with the Corporations Act 2001:
   (a) comply with Accounting Standards applicable to the company; and
   (b) give a true and fair view of the company’s financial position as at 31 December 2018 and of its performance for the year ended on that date in accordance with the accounting policies described in Note 1 to the accounts;

2. In the directors’ opinion there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors.

President
dated 23 February 2019

Graeme Green FCA
CHARTERED ACCOUNTANT
ABN 77 823 339 909

AUSTRALIA INDEPENDENCE DECLARATION
THE UROLOGICAL SOCIETY OF AUSTRALIA AND NEW ZEALAND


I declare that, to the best of my knowledge and belief, during the year ended 31 December 2018, there have been:

(i) no contraventions of the auditor independence requirements as set out in the Corporations Act 2001 in relation to the audit; and

(ii) no contraventions of any applicable code of professional conduct in relation to the audit.

Graeme Green FCA
Registered Company Auditor
No. 15169

Dated 23 February, 2019
The Urological Society of Australia and New Zealand  
ACN: 000 069 376

Statement of Comprehensive Income  
For the Year Ended 31 December 2018

<table>
<thead>
<tr>
<th>note</th>
<th>2018 $</th>
<th>2017 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Revenue</td>
<td>2 4,565,067.13</td>
<td>4,515,691.33</td>
</tr>
<tr>
<td>Total Revenue</td>
<td>4,565,067.13</td>
<td>4,515,691.33</td>
</tr>
<tr>
<td>Less: Office and Administration Costs</td>
<td>(1,624,659.64)</td>
<td>(1,281,663.06)</td>
</tr>
<tr>
<td>Meetings and Workshops</td>
<td>(1,373,654.63)</td>
<td>(1,231,276.42)</td>
</tr>
<tr>
<td>Section Expenses</td>
<td>(332,111.74)</td>
<td>(503,522.54)</td>
</tr>
<tr>
<td>Education and Operations Expenditure</td>
<td>(736,102.67)</td>
<td>(794,350.30)</td>
</tr>
<tr>
<td>Other Expenses</td>
<td>(97,991.53)</td>
<td>(115,137.19)</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>(4,163,520.21)</td>
<td>(3,925,949.51)</td>
</tr>
<tr>
<td>Surplus for the period</td>
<td>3 401,546.92</td>
<td>589,741.82</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.

The Urological Society of Australia and New Zealand  
ACN: 000 069 376

Statement of Financial Position  
As at 31 December 2018

<table>
<thead>
<tr>
<th>note</th>
<th>2018 $</th>
<th>2017 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>CURRENT ASSETS</td>
<td>4 10,561,149.14</td>
<td>11,210,354.68</td>
</tr>
<tr>
<td>Receivables</td>
<td>5 664,398.80</td>
<td>544,736.50</td>
</tr>
<tr>
<td>Investments</td>
<td>6 1,686,323.92</td>
<td>1,033,968.35</td>
</tr>
<tr>
<td>Other</td>
<td>7 384,798.94</td>
<td>472,561.71</td>
</tr>
<tr>
<td>TOTAL CURRENT ASSETS</td>
<td>13,286,670.80</td>
<td>13,261,621.24</td>
</tr>
<tr>
<td>NON-CURRENT ASSETS</td>
<td>8 1,279,042.75</td>
<td>1,132,605.92</td>
</tr>
<tr>
<td>Land and Buildings</td>
<td>1,279,042.75</td>
<td>1,132,605.92</td>
</tr>
<tr>
<td>Plant &amp; Equipment</td>
<td>8 193,000.58</td>
<td>57,541.68</td>
</tr>
<tr>
<td>TOTAL NON-CURRENT ASSETS</td>
<td>1,472,043.33</td>
<td>1,190,147.60</td>
</tr>
<tr>
<td>TOTAL ASSETS</td>
<td>14,768,714.13</td>
<td>14,451,768.84</td>
</tr>
<tr>
<td>CURRENT LIABILITIES</td>
<td>9 718,933.95</td>
<td>645,413.37</td>
</tr>
<tr>
<td>Provisions</td>
<td>10 136,122.77</td>
<td>122,286.00</td>
</tr>
<tr>
<td>Other</td>
<td>11 1,190,912.53</td>
<td>1,533,673.82</td>
</tr>
<tr>
<td>TOTAL CURRENT LIABILITIES</td>
<td>2,045,969.25</td>
<td>2,301,373.19</td>
</tr>
<tr>
<td>NON-CURRENT LIABILITIES</td>
<td>10 127,762.00</td>
<td>111,320.00</td>
</tr>
<tr>
<td>Provisions</td>
<td>127,762.00</td>
<td>111,320.00</td>
</tr>
<tr>
<td>TOTAL NON CURRENT LIABILITIES</td>
<td>127,762.00</td>
<td>111,320.00</td>
</tr>
<tr>
<td>TOTAL LIABILITIES</td>
<td>2,173,731.25</td>
<td>2,412,693.19</td>
</tr>
<tr>
<td>NET ASSETS</td>
<td>12,594,982.88</td>
<td>12,039,075.65</td>
</tr>
<tr>
<td>EQUITY</td>
<td>472,758.78</td>
<td>318,398.47</td>
</tr>
<tr>
<td>Retained Surpluses</td>
<td>12,122,224.10</td>
<td>11,720,677.18</td>
</tr>
<tr>
<td>TOTAL EQUITY</td>
<td>12,594,982.88</td>
<td>12,039,075.65</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
### Statement of Changes in Equity

For the Year Ended 31 December 2018

<table>
<thead>
<tr>
<th>note</th>
<th>Retained Surpluses</th>
<th>Revaluation Reserve</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>At 31 December 2016</td>
<td>11,130,935.36</td>
<td>318,398.47</td>
<td>11,449,333.83</td>
</tr>
<tr>
<td>Surplus/(Deficit) attributable to the entity</td>
<td>589,741.82</td>
<td>-</td>
<td>589,741.82</td>
</tr>
<tr>
<td>At 31 December 2017</td>
<td>11,720,677.18</td>
<td>318,398.47</td>
<td>12,039,075.65</td>
</tr>
<tr>
<td>Surplus/(Deficit) attributable to the entity</td>
<td>401,546.92</td>
<td>154,360.31</td>
<td>555,907.23</td>
</tr>
<tr>
<td>At 31 December 2018</td>
<td>12,122,224.10</td>
<td>472,758.78</td>
<td>12,594,982.88</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.

### Statement of Cash Flows

For the Year Ended 31 December 2018

<table>
<thead>
<tr>
<th>note</th>
<th>2018 $</th>
<th>2017 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Flows from Operating Activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proceeds from Operations</td>
<td>1,979,030.82</td>
<td>2,082,180.88</td>
</tr>
<tr>
<td>Proceeds from ASM</td>
<td>1,927,376.24</td>
<td>1,867,046.24</td>
</tr>
<tr>
<td>Proceeds from Section Activities</td>
<td>530,752.06</td>
<td>609,308.78</td>
</tr>
<tr>
<td>Interest Received</td>
<td>218,688.33</td>
<td>221,838.59</td>
</tr>
<tr>
<td>Payments to Suppliers</td>
<td>(2,705,893.71)</td>
<td>(2,438,050.01)</td>
</tr>
<tr>
<td>Payments for ASM</td>
<td>(1,373,654.63)</td>
<td>(1,397,571.55)</td>
</tr>
<tr>
<td>Payments for Sections</td>
<td>(332,111.74)</td>
<td>(558,914.25)</td>
</tr>
<tr>
<td>Net cash provided from operating activities</td>
<td>244,187.37</td>
<td>385,838.68</td>
</tr>
</tbody>
</table>

| Cash flows Investing Activities | | |
| Exchange Traded Funds Portfolio | (702,973.53) | |
| Property Plant & Equipment purchases | (190,419.38) | (24,264.52) |
| Net cash provided from Investing Activities | (893,392.91) | (24,264.52) |

| Cash flows Financing Activities | | |
| Net Proceeds from Redemption of Investments | - | - |
| Net cash provided from Financing Activities | - | - |

| Net Increase / (Decrease) in cash held | (649,205.54) | 361,574.16 |
| Cash held at the beginning of the financial year | 11,210,354.68 | 10,848,780.52 |
| Cash held at the end of the financial year | 10,561,149.14 | 11,210,354.68 |

The accompanying notes form part of these financial statements.
Notes to the Financial Statements
For the Year Ended 31 December 2018

Note 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The Urological Society of Australia and New Zealand is limited by guarantee, incorporated and domiciled in Australia. The financial statements were authorised by the Board of Directors on the 23rd February, 2019.

Basis of Preparation

The directors have prepared the financial statements on the basis the company is a non-reporting entity because there are no users dependent on general purpose financial statements. The financial statements are therefore special purpose financial statements that have been prepared in order to meet the needs of members and the requirements of the Corporations Act, 2001.
The company is a not for profit entity for financial reporting purposes under Australian Accounting Standards.
The financial statements have been prepared in accordance with mandatory Australian Accounting Standards applicable to entities reporting under the Corporations Act, 2001 and the significant accounting policies disclosed below, which the directors have determined are appropriate to meet the needs of members.
The financial statements, except for the cash flow information, have been prepared on an accruals basis and are based on historical costs and do not take into account changing money values or, except where stated, current valuations of non-current assets. Cost is based on the fair values of the consideration given in exchange for assets. The accounting policies have been consistently applied, unless otherwise stated.
The report is presented in Australian dollars.

Accounting Policies

a) Income Tax

The Society is exempt from paying income tax. No provision is made for income tax expense nor are there any deferred tax assets or deferred tax to be disclosed or accounted for.

b) Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST except:
• where the GST incurred on purchases of goods and services is not recoverable from the taxation authority, in which case the GST is recognised as part of the cost of acquisition of the asset or as part of the expense item as applicable.
• receivables and payables are stated inclusive of GST.
The net amount of GST recoverable from, or payable to, the taxation authority is included as part of receivables or payables in the statement of financial position.
f) Property, Plant and Equipment (cont)
Information technology assets - 3 years
Library books - 5 years

Impairment
The carrying values of property, plant and equipment are reviewed for impairment when events or changes in circumstances indicate the carrying value may not be recoverable. If such an indication exists and where carrying values exceed the recoverable amount, the asset is written down to the recoverable amount. Recoverable amount is the greater of fair value less costs to sell and value in use.

Land and Buildings
Land and buildings are based on Directors valuation or the independent valuations obtained every three years. They reflect independent assessments of the open market value of land and buildings based on existing use. Refer to Note 8 for details of the independent valuation current for the term of these financial statements.

g) Financial Assets
Recognition
Financial instruments are initially measured at cost on trade date, which includes transaction costs, when the related contractual rights or obligations exist. Subsequent to initial recognition these instruments are measured as set out below.
Financial assets at fair value through profit and loss
A financial asset is classified in this category if acquired principally for the purpose of selling in the short term or if so designated by management. Derivatives are also categorised as held for trading unless they are designated as hedges. These financial instruments are measured at fair value less transaction costs. The related contractual rights or obligations exist at trade date.
Loans and receivables
Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market and are stated at amortised cost using the effective interest rate method.

Held-to-maturity investments
These investments have fixed maturities, and it is the company’s intention to hold these investments to maturity. Any held-to-maturity investments held by the company are stated at amortised cost using the effective interest rate method.
Available-for-sale financial assets-Investments (Note 6)
Available-for-sale financial assets include any financial assets not included in the above categories. Available-for-sale financial assets are reflected at fair value. Unrealised gains and losses arising from changes in fair value are taken to the statement of comprehensive income.

Financial liabilities
Non-derivative financial liabilities are recognised at amortised cost, comprising original debt less principal payments and amortisation.
k) Comparative figures
Where necessary comparatives have been reclassified to ensure consistent presentation with the current year.

l) Critical accounting estimates and judgements
The directors evaluate estimates and judgements incorporated into the financial report based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and within the company.

m) New Accounting Standards for application in future periods
The AASB has issued new, revised and amended Standards and Interpretations that have mandatory application dates for future reporting periods. The Company does not expect them to have any material effect on the Company’s financial statements and will not be adopting them before the mandatory application dates.

n) New Accounting Standards adopted in financial year
During the current year there were no new or revised Australian Accounting Standards issued which had applicability for the Society.
The Urological Society of Australia and New Zealand
ACN: 000 069 376

Notes to the Financial Statements

Note 12 - COMMITMENTS FOR EXPENDITURE

The Society has commitment for expenditure and costs in relation to the running of the ASM in February, 2019. The Directors believe the 2019 ASM will return a surplus.

The company has commitments for the payment of annual grants each year.

Note 13 - CONTINGENT LIABILITIES

No contingent liabilities exist as at the date of this report.

Note 14 - EVENTS SUBSEQUENT TO REPORTING DATE

No event has occurred after the reporting date that would materially affect the results or state of affairs of the company at 31 December 2018.

Note 15 - RELATED PARTIES

Names of directors who held office at any time during the year:

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of appointment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stephen Brough</td>
<td>24-Feb-18</td>
</tr>
<tr>
<td>John Miller</td>
<td>24-Feb-18</td>
</tr>
<tr>
<td>Stephen Mark</td>
<td>18-Mar-14</td>
</tr>
<tr>
<td>Stuart Philip</td>
<td>24-Feb-16</td>
</tr>
<tr>
<td>Peter Healcoste</td>
<td>13-Apr-15</td>
</tr>
<tr>
<td>Tyrone Cartin</td>
<td>20-Feb-16</td>
</tr>
<tr>
<td>Frank Rodwig</td>
<td>13-Apr-15</td>
</tr>
<tr>
<td>Jeffrey Thavasalan</td>
<td>24-Feb-18</td>
</tr>
<tr>
<td>Mark Frydenberg</td>
<td>12-Apr-13</td>
</tr>
<tr>
<td>Karen McIntosh</td>
<td>20-Jul-16</td>
</tr>
<tr>
<td>Melvyn Kuan</td>
<td>18-Apr-16</td>
</tr>
<tr>
<td>Kim Moretti</td>
<td>28-Aug-12</td>
</tr>
<tr>
<td>Mohamed Khadra</td>
<td>6-May-17</td>
</tr>
</tbody>
</table>

Remuneration of Directors

Directors provide their services on a voluntary basis. The President does not receive an annual allowance but is reimbursed reasonable travel and other costs associated with his role and duties as President.

The Board Chair does not receive an annual allowance but is reimbursed reasonable travel and other costs associated with his role and duties as Board Chair.

Other Directors are reimbursed for out of pocket expenses associated with their role and duties as a Director.

Note 16 - REMUNERATION OF AUDITORS

<table>
<thead>
<tr>
<th>Date of appointment</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Audit services</td>
<td>12,700.00</td>
<td>9,850.00</td>
</tr>
</tbody>
</table>

Note 17 - CASH FLOW INFORMATION

(a) Reconciliation of Cash

Cash at the end of the financial year as shown in the Statements of Cash Flows is reconciled to the related items in the statement of financial position as follows:

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash in hand and at Bank</td>
<td>10,561,149.14</td>
<td>11,210,354.68</td>
</tr>
</tbody>
</table>
The Urological Society of Australia and New Zealand
ACN: 000 069 376

Notes to the Financial Statements

Note 17 - CASH FLOW INFORMATION (Cont)

(b) Reconciliation of Cash Flow and Surplus for the period

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surplus for the period</td>
<td>401,546.92</td>
<td>589,741.82</td>
</tr>
<tr>
<td>Non cash flows in operating profit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depreciation</td>
<td>62,884.03</td>
<td>38,176.00</td>
</tr>
<tr>
<td>Portfolio valued at market</td>
<td>50,617.89</td>
<td>(58,024.47)</td>
</tr>
<tr>
<td>Changes in assets and liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Decrease / (increase) in receivables</td>
<td>(119,662.30)</td>
<td>75,662.34</td>
</tr>
<tr>
<td>Decrease / (increase) in other assets</td>
<td>87,762.77</td>
<td>(167,307.07)</td>
</tr>
<tr>
<td>(Decrease) / increase in accounts payable</td>
<td>73,520.58</td>
<td>(120,568.42)</td>
</tr>
<tr>
<td>(Decrease) / increase in provisions and other liabilities</td>
<td>(312,482.52)</td>
<td>26,218.48</td>
</tr>
<tr>
<td>Net cash flows from operating activities</td>
<td>244,187.37</td>
<td>385,838.68</td>
</tr>
</tbody>
</table>

Note 18 - FINANCIAL RISK MANAGEMENT

The Society's financial investments consist of deposits with banks, short term deposits, local money market instruments, managed fund investments, accounts receivable and payable. The directors overall risk strategy seeks to assist the Society meet its stated objectives whilst minimising potential adverse effects on financial performance. The Society's main risks are interest rate and credit risk.

Interest Rate Risk

The company's exposure to interest rate risk is the risk that a financial instrument's value will fluctuate as a result of changes in market interest rates. Based on current income producing assets the Society's sensitivity to a 1% movement in interest rates is approximately $107,348 per annum. The effective weighted average interest rate on those financial assets and liabilities is as follows:-

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>Interest Rate</td>
<td>Non Interest Rate</td>
<td>Interest Rate</td>
<td>Non Interest Rate</td>
</tr>
<tr>
<td>Cash on Hand</td>
<td>503.00</td>
<td>503.00</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Business cheque accounts</td>
<td>146,508.74</td>
<td>233,745.91</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business cash reserve</td>
<td>0.0%</td>
<td>0.0%</td>
<td>925,175.91</td>
<td>1,209,300.74</td>
</tr>
<tr>
<td>CMA Investment Option</td>
<td>0.01%</td>
<td>344,076.77</td>
<td>514,935.82</td>
<td>434,647.77</td>
</tr>
<tr>
<td>Notice of Withdrawal-31 Day</td>
<td>0.40%</td>
<td>319,311.65</td>
<td>354,966.47</td>
<td>319,311.65</td>
</tr>
<tr>
<td>Notice of Withdrawal-90 Day</td>
<td>0.40%</td>
<td>8,974,025.67</td>
<td>7,909,870.62</td>
<td>7,909,870.62</td>
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Financial Liabilities

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</tr>
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</table>

Note 19 - MEETINGS OF OFFICERS

<table>
<thead>
<tr>
<th>Director's Name</th>
<th>Number of Meetings Eligible to Attend</th>
<th>Number Attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stephen Brough</td>
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<tr>
<td>Stephen Mark</td>
<td>7</td>
<td>6</td>
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<tr>
<td>Melvyn Kuan</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>Mark Frydenberg</td>
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<tr>
<td>Tyrone Carlin</td>
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<tr>
<td>Mohamed Khadra</td>
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<td>Kim Moretti</td>
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<td>Karen McKerlich</td>
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<tr>
<td>Frank Redleg</td>
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<tr>
<td>Peter Heathcote</td>
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<td>John Milari</td>
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<tr>
<td>Stuart Philip</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Jeffrey Thavaseelan</td>
<td>5</td>
<td>4</td>
</tr>
</tbody>
</table>

* Director's tenure finished 24 February 2018

Note 20 - COMPANY DETAILS

The registered office and principal place of business of the Society is:
Suite 512, Eastpoint
180 Ocean Street
Edgecliff NSW. 2027
FINANCIAL REPORTS

GRAEME GREEN  FCA
CHARTERED ACCOUNTANT

GPO Box 4566 Sydney NSW 2001
Telephone: (02) 9231 6166
Facsimile: (02) 9231 6155
Mobile: 0419 236 495
Email: ggreen@graeemegreen.com.au

Suite 807, 109 Pitt Street, Sydney

ABN 77 823 539 909

FINANCIAL REPORTS

THE UROLOGICAL SOCIETY OF AUSTRALIA AND NEW ZEALAND
INDEPENDENT AUDITOR’S REPORT

To the Members of The Urological Society of Australia and New Zealand

Opinion

I have audited the financial report of The Urological Society of Australia and New Zealand ("the Society") which comprises the statement of financial position as at 31 December 2018, statement of comprehensive income for the year then ended, statement of changes in equity, statement of cash flows, and notes to the financial statements, including a summary of significant accounting policies, and other explanatory notes and the directors’ declaration for the Society.

In my opinion, the accompanying financial report presents fairly, in all material aspects, the financial position of the Society as at 31 December 2018, and its financial performance for the year then ended in accordance with the accounting policies described in Note 1 of the financial statements.

Basis for Opinion

I conducted my audit in accordance with Australian Auditing Standards. My responsibilities under those standards are further described in the Auditor’s Responsibilities for the Audit of the Financial Report section of my report. I am independent of the Society in accordance with the auditor independence requirements of the Accounting Professional and Ethical Standards Board’s APES 110 Code of Ethics for Professional Accountants ("the Code") that are relevant to my audit of the financial report in Australia. I have also fulfilled my other ethical responsibilities in accordance with the Code.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Emphasis of Matter – Basis of Accounting

I draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist the Society meet the requirements of the Corporations Act 2001. As a result, the financial report may not be suitable for another purpose. My opinion is not modified in respect of this matter.

Information Other than the Financial Report and Auditor’s Report Thereon

The directors of the Society are responsible for the other information which comprises the Directors Report.

My opinion on the financial report does not cover the other information and accordingly I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial report, my responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact. I have nothing to report in this regard.


The directors of the Society are responsible for the preparation and fair presentation of the special purpose financial report in accordance with the accounting policies described in Note 1 of the financial statements and for such internal control as the directors of the Society determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

In preparing the special purpose financial report, the directors of the Society are responsible for assessing the Society’s ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors of the Society either intend to liquidate the Society or to cease operations, or have no realistic alternative but to do so.

The directors of the Society are responsible for overseeing the Society’s financial reporting process.

Auditor’s Responsibilities for the Audit of the Financial Report

My objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor’s report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with the Australian Auditing Standards, I exercise professional judgement and maintain professional scepticism throughout the audit. I also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Society’s internal control.
It is with great pleasure that I present this Board of Urology report to the USANZ membership.

The year has passed quickly after I had the pleasure of taking over as the Board Chair from Melvyn Kuan in February 2018. I still remember Melvyn handing over to me as a new 1st-year trainee at The Repatriation General Hospital in Adelaide in 2003. Melvyn is a true gentleman who negotiated some difficult times as Board Chair, and I only hope that I can continue his good work. On behalf of our Society, I sincerely thank Melvyn for his leadership, commitment, and dedication to urological training over many years.

As always, the past 12 months have been full of challenges and difficult issues, as well as the tragic loss of one of our trainees. The Board, Supervisors, Trainers, Trainees, and indeed the general membership, have worked together to overcome these and support each other.

There has been an increasing move away from the traditional apprenticeship model of surgical training to more active and supervised training of both the Trainee as well as the Trainer. This model has created its own issues and concerns, but I believe that we will have a much more robust delivery of training in the future. It has also led to a greater focus on rigorous Post Accreditation and the completion of RACS mandatory training requirements for all. Thank you for the time that you have all invested in this.

Complaints handling has been a problematic issue that the Board has had to contend with in 2018. The Board of Urology is committed to working with RACS to improve, simplify and streamline the way that complaints are handled in the future.

My predecessors, Richard Grills and Melvyn Kuan, had the foresight to restructure the Board of Urology to include a Sub-Committee structure. These have continued to develop in 2018, and I believe that our Sub-Committees are working well and contributing positively to the functioning of the Board of Urology. Over the coming 18 months, we will see the rollout of the new Urology Curriculum which will change the face of training as we know it. There will be even more acronyms to learn – WBAs and EPAs to name a few! The Selection Sub-Committee continues to refine and improve our Selection. We are a popular surgical specialty and selection has become a very competitive process. Post-accreditation is thorough and robust. I appreciate the work of our Supervisors and Training Institutions in continuing to work collaboratively with the Board to improve Posts.

Richard Grills has continued as IMG Representative and contributes enormously to the development of a robust and clear assessment process and pathway for IMG applicants.

There are too many people to thank, but I couldn’t do my job without the support of many. I want to extend a personal thanks to Deborah Klein and Kirsten Isaacs, who have been the source of invaluable corporate knowledge and provide logistical support beyond their duty, without them the training program could not function. The Board of Urology has enjoyed a close working relationship with the Board of Directors this year, and I would like to acknowledge the work of Peter Heathcote and Michael Nugara in this regard.

I would also like to recognise the substantial and valuable contributions of the members of the Board of Urology (current and past members) and other office bearers.

Governance

The Terms of Reference for the Board of Urology were updated in early 2018. One of the significant amendments was a change in terminology for Sectional Training Accreditation and Education (TA&E) Committees, which was USANZ terminology. As these are committees of the Board of Urology, RACS, they are now referred to as Regional Training Committees. This terminology is in line with the Terms of Reference of other Training Boards.

Trainees

The end of 2018 was marked with immense sadness for our urological community as a tragic accident took the life of one of our trainees, Dr Daniel Christidis. Before commencing the training program in 2018, Daniel spent several years working as a junior doctor at the Austin Hospital where his passion for urology ignited. He became an enthusiastic and accomplished researcher culminating in international presentations and recognition well beyond his years.
At the end of 2018, 104 trainees were participating in research at national and international meetings. A scholarship that will contribute to supporting be with the Christidis family. Daniel was a caring and compassionate doctor, always going the extra mile to help his patients. He was exceptionally well regarded by his co-workers who were all grateful to have had the chance to work with him. Our thoughts continue to be with the Christidis family.

In memoriam, USANZ and RACS established a scholarship that will contribute to supporting individuals who wish to present their academic research at national and international meetings.

At the end of 2018, 104 trainees were participating in the SET Program in Urology. The distribution was as follows:

<table>
<thead>
<tr>
<th>nSET</th>
<th>No.</th>
<th>SET</th>
<th>No.</th>
<th>Total</th>
</tr>
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<td>SET3</td>
<td>17</td>
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</tr>
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<tr>
<td></td>
<td>Total</td>
<td></td>
<td>104</td>
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</tr>
</tbody>
</table>

We congratulate the following trainees who completed training in 2018 and wish them well in their future urological career:

Sarah Azer, Kieron Beattie, Paul Davis, Ross Fowler, Matthew Hong, Liam Kavanagh, Kara McDermott, Stuart Menogue, Joanna Olphert, Sophie Plagakis, Weronia Ranasinghe, Anthony Ta, Isaac Thangasamy, Jurjen Wester, Henry Yao, Jinna Yao.

We also congratulate Simon Prideon and Marc Paffen who attained the FRACS (Urol) following 2018 selection process for trainees who sought to participate in training and will ensure we continue to have a robust system for measuring progress at multiple points in a trainee's progression. It is also important that we counsel our trainees as to when they are ready to attempt the Fellowship Examination.

The feedback provided to unsuccessful candidates in the Fellowship Examination continues to improve, and I thank Anita for the work that she has done in this regard.

17 trainees passed the Surgical Sciences Examination in Urology in 2018. The Frank Gardiner Award was once again presented to the trainees attaining the highest score at each sitting. The recipients were Ned Kinnear in the June exam and Jonathan Kam in the October exam.

Selection

63 doctors applied in the 2018 selection process for entry into the nSET Program in Urology in 2019. The following 20 new trainees were selected and will commence clinical training in 2019:

- NSW: Michael Bock, Dane Cole-Clark, Alice Grant, Alfin Okullo, Wenjie Zhong
- QLD: Jack Crozier, Samuel Davies, Sachinka Ranasinghe, Susan Scott
- VIC: Emma Clareborough, Tatenda Nazerna, Claire Pascoe, Sophie Riddett
- NZ: Cynthia O’Sullivan, Joshua Silverman, Lance Yuan
- SA: Richard Hoffman
- WA: Haidar Bangash, James Chen, Simeon Ngweso

We acknowledge the significant contribution of the members of the Urology Court of Examiners and thank Anita Clarke for her guidance and leadership as Senior Examiner.

The following trainees and IMGs passed the Fellowship Examinations in 2018, and we congratulate them on their success:


The Fellowship Exam remains just one part of the attainment of a FRACS (Urol). It is essential that we have a robust system for measuring progress at multiple points in a trainee’s progression. It is also important that we counsel our trainees as to when they are ready to attempt the Fellowship Examination. The Board of Urology continues to work with both the Court of Examiners and Training Supervisors to improve this process.

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- NZ: Cynthia O’Sullivan, Joshua Silverman, Lance Yuan
- SA: Richard Hoffman
- WA: Haidar Bangash, James Chen, Simeon Ngweso
Trainee Week
Trainee Week was held in Fremantle in late November for all nSET1-SET5 trainees. We extend our sincere gratitude to the Convenor, Jennifer Kong, who organised an educational, stimulating meeting along with social events that highlighted WA. The logistics of holding this event are considerable, and we congratulate Jenny and her team.

Trainee Week remains the most important week of the training calendar. It has attained an international reputation as a quality meeting, in no small part due to the individual members of the hosting Section. I thank the WA Urologists, and other local medical experts, for their input and time in contributing. We now look forward to Brisbane 2019.

Final Words
My first year as Board Chair has been challenging, fulfilling, and difficult. It’s difficult to prepare for the role, and I frequently feel that I can’t live up to my enormously capable predecessors. Not everyone is always happy with the Board’s decisions and particularly those made by the Board Chair; I hope to learn from any mistakes and rise to the challenges.

I want to acknowledge my wife and children who support me in this role. It’s incredibly time consuming, and the frequent flyer points don’t make up for the time away from home.

No Board report would be complete without noting the total commitment that Deborah Klein, Education and Training Manager has to her job. I single her out, as the success of our training program is in a large part due to her drive, passion and incredible organisation. The reporting aspects of the training program are more onerous than ever, and I could not do my job without her support and dedication.

2019 promises to be an exciting year in Urology Training. The Board has several projects underway that should come to fruition this year. The challenges of the year are yet unknown but awaited!

On a positive note, the highlight of my year is always meeting and presenting to the new 1st year trainees at the Induction weekend, which I did recently. It is refreshing to see the ambition and drive in the eyes of the newest members of our society. I believe that our future is in good hands.
Continuing Professional Development

Peter Heathcote

USANZ aims to provide a CPD program that is easily accessible with quality learning exercises and strives to offer strong encouragement to members to ensure that their performance follows best practice.

The USANZ CPD program creates a continual learning experience for qualified urologists, supported by high-quality educational meetings and activities in all their forms throughout the year.

Many of our members are very generous with their time in tutoring and mentoring colleagues when gaining and improving new skills. By learning from our peers and benchmarking ourselves against the world’s best practices, we can rapidly reach good performance status, especially with the introduction of new technologies.

Our CPD program includes education events such as the Section meetings (organised by the Sections) and other satellite meetings run by USANZ, and all members are encouraged to attend. I would like to sincerely thank our meeting convenors who so generously give their time and expertise for the benefit of all USANZ members. Our Annual Scientific Meeting is the cornerstone of our educational interchange and learning; at the time of writing this report the 2019 ASM is shaping up to be another outstanding meeting.

One of the strategies we continued to implement in 2018 was providing all USANZ Full Members with free access to BJUI Knowledge (BJUK), an online CPD / CME initiative developed by BJUI. As well as providing high-quality and interactive e-learning that supports continuous professional excellence in Urology, members can record all their professional development activities on the BJUK Knowledge platform anywhere and at any time using any device.

We encourage members to participate in the PCO-RANZ initiative which is approved as an audit activity under the RACS CPD program. It is pleasing to note the Nephrectomy registry pilot commenced in 2018 and patient data is being entered by the pilot sites; RACS has also approved this as an audit activity.

Please support our Society’s endeavours in keeping us abreast of the latest developments and the world’s benchmarks and outcomes by attending the Section Meetings, our ASM and all the great satellite meetings that occur during the year. As we all know, attending these meetings fulfils many of the criteria we need for recertification by the College.

Members are encouraged to support the USANZ journal supplement, please continue to submit papers for publication. Most urological journals are available online either directly or through the College.

Annual Scientific Meetings

Melbourne 2018

Nathan Lawrentschuk, Convenor

The 71st USANZ Annual Scientific Meeting in conjunction with the Urological Nurses (ANZUNS) Meeting was held in Melbourne in February and enjoyed the largest attendance in six years. Melbourne provided a great backdrop with a vibrant and busy central business district, cultural and sporting venues, the Yarra River flowing past the conference centre, edgy graffiti and trendy coffee shops.

The program included a day of well-attended masterclasses on a range of subjects, including urological imaging, advanced robotic surgery (with a live case from USC), metastatic prostate cancer and penile prosthetics. Professor Webb presented a popular PCNL session, supported by industry, and provided an opportunity to use the latest nephroscopes on porcine models and innovative aids to realistically practice different puncture techniques.

Two plenary sessions were held each morning covering the breadth and depth of urology. Dr Sotelo is always a highlight, he presented, to an auditorium of collective gasps, a unique selection of ‘nightmare’ cases providing insight into how intraoperative complications occur and how to avoid them... Tim O’Brien shared his invaluable expertise on performing IVC thrombectomy highlighting the need for preoperative planning, early control of the renal artery and consideration of pre-embolisation. His second plenary on retroperitoneal fibrosis provided clarity on the management of this rare condition highlighting the role of PET imaging and, as with complex upper tract surgery, the importance of a dedicated team. Tony Costello’s captivating presentation covered several myths in robotic prostate surgery, plus the importance of knowing your outcome figures, and predicted a future where robotics and laparoscopy will be the same cost. Various sessions covered future technology, progress in cancer genomics and biomarkers.

One example of this was Aquablation of the prostate; Peter Gilling presented the WATER trial results suggesting non-inferiority to TURP. A welcome addition to the program was Victoria Cullen, a psychologist and Intimacy Specialist who provides education, support and strategies for sexual rehabilitation. She described her usual consultation with men with sexual dysfunction and how to transform worries about being ‘normal’ to focusing on what is important to the individual.

Joint plenary sessions with the AUA and EAU were highlights. Prof Chris Chapple confirmed the need for robust evidence guidelines that support clinical decision making; and in many cases can be used internationally. He suggested that collaboration is crucial between us as colleagues and scientists working in the urology field. Michael Lipkin described stone prevention and analysis of available evidence; however, unfortunately, stone formers are usually under-estimators of their fluid intake, so encouragement is always needed! Amy Kranerbek presented evidence for concurrent use of anticoagulants and antiplatelets during BOO surgery and suggested there can be a false sense of security when stopping these medications as it isn’t always safe. She championed HoLEP as her method of BOO surgery and continues medications, although the evidence does show that blood transfusion rate may be higher. She also uses a fluid warming device which has less bleeding and therefore improved surgical vision; importantly it is preferred by her theatre nurses! Many speakers covered MRI of the prostate; however, Jochen Walz expertly discussed the limitations of MRI, in particular, relating negative predictive value. He eloquently explained the properties of cIBiform Gleason 4 prostate cancer and how this variant contributed to the incidence of false negatives.

Moderated poster and presentation sessions showcased research and audit projects from the UK, Australia, New Zealand and beyond, mainly led by junior urologists. The best abstracts submitted by USANZ trainees were invited to present in the Villis Marshall and Keith Kirkland prize session. These prestigious prizes were
valiantly fought for and reflected high-quality research completed by the trainees. Projects included urethral length and continence, no need for lead glasses, obesity and prostate cancer, multi-centre management of ureteric calculi, mental health of surgical trainees and seminal fluid biomarkers in prostate cancer. This enthusiasm for academia will undoubtedly stand urology in good stead for the future.

The Industry Exhibition provided excellent networking and trade engagement opportunities, while 1-minute poster presentations ensured a succinct summary of important findings. Trainees discussed the highs and lows of training and ideas for fellowships, along with issues such as clinical burden and operative time, selection into the specialty, cost of training, burn out and exam fears. However, there is great enthusiasm, a passion for urology, and inspirational trainers that help balance the burdens that trainees face. Also, USANZ ‘SET’ Trainees were invited to meet with the international faculty in a ‘hot seat’ style session which provided an excellent opportunity with the international faculty in a ‘hot seat’ style session which provided an excellent opportunity to discuss careers and aspirations.

The opening address by Peter Heathcote included the phrase ‘together we can do so much more’, and this theme of collaboration was apparent throughout the conference. The future is bright with initiatives led by enthusiastic trainee groups BURST and YURO to collect large volume, high-quality data from multiple centres, such as MIMIC. Social media, telecommunications and innovative technology should be used to further the specialty, especially with research and in cases of rare diseases – such as RPF. Urologists have harnessed the power of Twitter, and it was used frequently with the hashtag #USANZ18.

The Gala Dinner was a great chance to unwind, catch up with friends and celebrate successes in the impressive surroundings of Melbourne Town Hall; with the organist playing a particularly rousing rendition of Phantom of the Opera on arrival.

I extend a huge thank you to Declan Murphy for his incredible efforts on the scientific program. The 2018 USANZ 71st ASM presented an exemplary scientific program within an edgy, artsy, and friendly city, and the lively social program complimented this perfectly. The consensus of a highly successful meeting, I’m sure was shared by all.

I want to thank Sophie Rintoul-Hoad and Rick Catterwell who wrote this comprehensive review of the meeting and published it at the BJUI website http://www.bjuinternational.com/bjui-blog/usanz-2018-melbourne/.

Finally, no meeting is complete without our Platinum, Gold, Silver, and Bronze Sponsors. Industry funding is much appreciated and allows our education to continue.

I wish Peter Burke and the team organising the 2019 ASM in Brisbane all the best and have no doubt they will provide an excellent educational and social program.

Brisbane 2019

Peter Burke, Convenor

The 72nd USANZ ASM in Brisbane in 2019 has the unique opportunity to partner with the 17th Meeting of the Asia-Pacific Society for Sexual Medicine (APSSM). This meeting precedes the ASM by two days and will allow valuable crossover for USANZ delegates who wish to expand their Sexual Medicine knowledge and vice versa.

Ian Vela, Scientific Convenor has assembled a USANZ Scientific Program of remarkable quality with a diverse group of international guests originating from North America, Canada, the United Kingdom as well as Asia and India.

The diversity of the faculty will ensure that all plenary sessions provide maximum value and give delegates an exceptional educational opportunity. The Saturday Workshop program maintains many of the consistently popular sessions of recent years with a few new opportunities available.

Planning for the ANZUNS Meeting in 2019 has been coordinated by Rachel Oxford-Webb (Convenor) and Arianne McKinnon (Scientific Convenor). This is the 24th Meeting and promises to offer an array of educational and social experiences alongside USANZ, with both organising committees keen to overlap wherever possible for the benefit of all.

It is with great pride that we are hosting the current Australian of the Year, Dr Richard “Harry” Harris as the Harry Harris Orator. Harry is the obvious choice by name and will undoubtedly deliver a memorable oration, considering his astounding exploits during the 2018 Thailand cave rescue.

Socially, we’re excited to showcase Brisbane with the Convention Centre and conference hotels situated in South Bank, home to an extensive choice of entertainment, dining and cultural experiences. The Gala Dinner will be held in Brisbane’s newest entertainment precinct, Howard Smith Wharves, and guarantees to offer a night unlike any other in the history of USANZ.

The organising committee greatly appreciates the contribution of the SAG leaders to faculty choices, workshop contributions and commitments to the scientific program. Unfortunately, we lost the vast organisational experience of Jan Shaw in 2018, but Anna Tartakovskaia has integrated into the role exceptionally well. My close colleague Peter Heathcote has provided sage advice along the way, and I am grateful to Michael Nugara for his ongoing support and guidance.
Sydney 2020

Jerard Ghossein, Convenor

Planning for USANZ 2020 is underway, and the ASM will be held at the International Convention Centre at Darling Harbour in Sydney from 7 to 10 March. I am delighted that my fellow West Australian, Dr Shane La Bianca, Scientific Committee Chair, has been working with SAG Leaders to develop a list of potential international faculty members. Of course, the program will continue to progress over the next 12 months so check the ASM website after April for updates. We are looking forward to hosting the ASM in Sydney after a very long absence; enjoying the sights and experiences of this amazing, dynamic city. I have no doubt we will have an outstanding scientific program, delivered in the newest convention centre in Australia.

Mark your diary now!

Specialty Elected Councillor to RACS

Mark Frydenberg

2018 was a year which saw improved communication between RACS and USANZ. Mary Harney was appointed as new CEO at RACS, leading to a renewed management structure with Executive Managers for Education, Resources and Advocacy/Professional Development. A major, and welcome platform of the new strategy for RACS is improved engagement with Specialty Societies. This collaboration will include all areas of activity of RACS especially Education, Advocacy, Professional Standards and Development.

There have already been several face to face meetings between RACS leadership and USANZ with a further meeting planned after the ASM in April. The main area of activity is the review of the RACS CPD program that will have an impact on USANZ membership. RACS is working within the framework provided by AHPRA and the Medical Board of Australia and is looking at ensuring the CPD program meets the regulators’ requirements but is also helpful for members and is contemporary and modern. It is a project that will take 12-18 months to complete followed by an implementation stage. At all stages, RACS will consult with USANZ regarding the structure and content, and we anticipate that urology specific initiatives such as participation in registries and BJUI Knowledge will be acceptable to the new CPD structure.

As the Urology elected representative, I look forward to a productive year with the improved relationship between RACS leadership and USANZ, and I also welcome Henry Woo on to RACS Council which will add another urology voice to the extensive discussions held at RACS.

Victoria

Mark Frydenberg: Federal USANZ representative

Dennis Gyomber: Regional Training Committee Chair

Mark Forbes: Country Representative

Lih-Ming Wong: Victorian Section Meeting Convenor

2018 meetings

In 2018 the committee had two meetings (7 March and 12 September), with reports circulated to committee members in June and followed up by email. At the AGM we agreed to forgo regular meetings and conduct business by email, with a view to re-convening the committee if a substantive issue required more in-depth discussion.

The Victorian Section Meeting was held on Friday 12 October 2018 at Fenix Events, Richmond convened by Lih-Ming Wong. The 2019 Victorian Section Meeting will be held on Friday 11 October 2019, again at Fenix Events, Richmond, hosted by Austin Hospital.

Prizes

Athina Pirpiris won the Peter Lawson Award for the best SET5 trainee based on aggregate performance over three years of training (SET3-SET5); Ryan William Van Hoorn won 1st Prize and Deanne Soares won 2nd Prize for presentations delivered by registrars at the 2018 Victorian Section Meeting.

Education and Training

16 Victorians applied for the SET Training Program in Urology in 2018 for the 2019 intake, eight were shortlisted and five appointed (of whom one was appointed to another section). Six Victorian trainees and one locally supervised IMG were successful in the Fellowship examination in 2018.
Representative and Section Reports

South Australia / Northern Territory

John Miller

The past twelve months have seen continued change within the Urology community in the SA and NT Section. I replaced Kim Moretti as the SA&NT section representative, and we all thank him for his hard work on the Board of Directors as our representative and Policy Chair for USANZ.

The new RAH, opened in October 2017, continues to find its way within the SA Health system and has slowly improved as an educator and training institution. The closure of the Repatriation General Hospital and movement of the Urology Unit to Flinders Medical Centre has also occurred without undue disruption, and the GEH and Lyell McEwin continue to treat Urology patients, the latter with expansion on the way. Dr Arman Kahokehr returned from his reconstructive fellowship in the USA and has commenced practice at the Northern Area Local Health Service along with Dr Peter Penkoff and me. Lyell McEwin and Modbury hospitals have therefore started a 24/7 Urology cover successfully. The members of the unit would like to thank the RAH Urology Unit for assisting with this task over many years. We are very fortunate to have ongoing support for training within South Australia with three major teaching hospitals (RAH, TQEH, FMC) being reaccredited in 2018. Due to the appointment of several new Urologists at Lyell McEwin Health Service, we anticipate that training opportunities will continue to expand within SA over the coming few years. We are very grateful to all the Urologists in SA who continue to give their time for education willingly.

After three years as Chair of the SA Training Committee, Darren Foreman completed his term in mid-2018 and will continue to contribute to education within USANZ on the Accreditation sub-committee. Andrew Fuller was appointed Chair in May 2018 and will be ably supported by Rick Catterwell as Deputy Chair and the hospital supervisors Raj Singh-Rai (RAH) and Jason Lee (FMC). We welcomed Sophie Plagakis back to South Australia in early 2019 after she completed her SET6 year in Sydney and received her FRACS.

Dr Richard Hoffmann will commence SET Urology at Flinders Medical Centre in 2019, we wish him every success during his training.

Two long-serving Urologists have retired from the Public Hospital System, Peter Sutherland (RAH) and Zenon Hertzberg (Modbury Hospital); we thank them for their many years of service to South Australian patients, Trainees and other Consultants who have worked with both over the years. Both continue to work in private and remain involved within the SA and NT Section of USANZ. Since his commencement as a Urologist many decades ago, Adrian Porter has been a fixture in Adelaide Urology. I thank him for his mentorship during my training and in the first few years of my life as a Urologist. His calm manner, common sense, communication skills, surgical expertise and breadth of knowledge will be greatly missed. Adrian has served on the Urology Society Executive (predecessor of the Board of Directors), Urological Foundation, local T&AE and President, and he also convened a very successful ASM in Adelaide in the mid-1990s. We all wish Adrian an enjoyable, fruitful and healthy retirement.

Samantha Pillay convened an excellent Annual Scientific Meeting in October 2018 with many superb presentations by the local junior doctors including SET Trainees. The guests, Professor Helen O’Connell and Dr Stephen Mark, stimulated discussion around their areas of expertise and specifically in how to improve urological and medical systems to benefit patients, Urologists, and the health system. Trainee Gary Wang won the prestigious St Paul’s Ball for best presentation by a USANZ Member (Trainee or Urologist) and Kirsten Gormley from Jones and Partners Radiology the Best Presentation of the meeting. The individual financial situation of the SA and NT Section remains stable and is under the oversight of USANZ. We have made a further commitment to the SA PCOCC Database which is going from strength to strength as the data catchment continues. The local section has decided to nominate section scientific convenors prospectively, and Dr Alex Jay and Dr Rick Catterwell have volunteered to convene the next two section scientific meetings. Dr Samantha Pillay spoke strongly in favour of deleting the role of Section President in favour of the local USANZ Board of Director member becoming the conduit between the Section members and the USANZ Board. The Annual Business Meeting attendees supported this proposal unanimously.

The Northern Territory has been unsuccessful in recruiting an Australian or New Zealand Fellow or Consultant and continues to rely on IMGs and General Surgeons to perform a substantial volume of urology in the public system. Visiting Urologists from Adelaide and Cairns have a presence as a fly in/fly out service but mostly in the private sector. Henry Duncan is currently recruiting a South African Urologist, initially as a Fellow, but hopefully as a Consultant pending satisfactory AMC and RACS assessment. Darwin Hospital also provides an outstanding opportunity for pre-SET training with a structured program, including an ICU term, with excellent experience in General Surgery with the option of dedicated urology term.

Northern

HS Teng

The Northern section had a successful 2018 with great support from its members. This year we built on the sound foundation laid down by Dr Roger Watson, our past Chair, and had our annual section meeting at the same location, Rydges South Bank. Our members, especially our PHO, registrar and junior staff, strongly supported the meeting. We acknowledge with thanks the excellent and stimulating contributions by our guests; Dr David Sofield, Dr Denby Steele, Prof Judith Goh, Dr Nicholas Brown and Dr Jeffrey Goh.

This year, Dr Marlon Perera won the Professor Frank Gardiner Prize for the best registrar’s presentation. We hope to continue this award for the foreseeable future.

We also acknowledge the dedicated contribution made by our President, Dr Peter Heathcote and our Regional Training Chair, Dr Malcolm Lawson.

Congratulations to Drs Ross Fowler, Nick Rukin, Patrick Teloken, and Matthew Roberts who were successful in the Fellowship examinations.

With the change of funding model for the state-based annual urological meeting, it will be a challenge to organise this event outside the Brisbane metropolitan area given the wide geographical distribution of our urological colleagues. However, it would be a gesture of appreciation for our colleagues who work in regional hospitals if the meeting can occasionally move out of the city. We are going to take up the challenge in 2019.

New South Wales

Ramin Samali

Cypress Lakes in the Hunter Valley was the venue for the 2018 NSW section meeting held between 1-3 November 2018. Dr Ramin Samali, Section Chair, convened the meeting and Dr Dominic Lee organised the scientific program. The program included both international and local speakers, and most participants were satisfied with the content and calibre of the presentations. Our international speakers included Dr Wilhelm Bauer from Vienna, Austria (minimally invasive urologist and inventor) and Mr Nim Christopher from London, UK, an expert in penile surgery, who gave several talks regarding management of male genitourinary surgery. Our national speakers included Dr Fiona Maclean, urogenital pathologist, Dr Vincent Tse, continence and pelvic surgery expert, Dr Shannon Kim, microsurgery and male infertility, and Mr Steven Macarounas, financial advisor. All the speakers provided excellent talks in line with their specialty. The Convenors for the next two years were nominated and accepted; the 2019 Convenor is Dr Hodo Hashimolla, and the 2020 Convenor will be Dr Steve Sower. Dr James Churchill won the Chris Farrell award for Best Registrar Paper, and Dr Rasha Gendi won the George Schnitzer Award for Best Registrar. We also congratulate Rasha Gendi and Stuart Menogue who passed the Fellowship exam in 2018.

Representative and Section Reports

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New Zealand

Stephen Mark

Madhu Koya, NZ Section Chair, ran a successful clinical directors’ meeting at the Palmerston North ASM, with a focus on standardisation of care and the USANZ funded reports on Radical Prostatectomy and Nephrectomy. He has been involved in developing USANZ support in NZ for urologists’ compliance with mesh surgery and is pushing for centralisation of treatment of mesh complications.

The ASM in Palmerston North was successful thanks to the hard work of Christophe Chemasle and Karen Nistor. The guests experienced live endourology; Guido Giusti spoke on the role of Cx Triage and Cx Bladder a non-invasive test in TCC; bladder plus; Prof James Green and Paula Allchorne (supported by PCFNZ) presented on survivorship in prostate cancer. Andrea Nixon and her team combined some practical nursing workshops to allow experienced nurses to provide an increasing role in the care of urological patients. It was capped off by a stellar dress-up dinner themed “Priscilla Queen of the desert”, with a dance-off won by the Christchurch delegation.

The Prostate Cancer Registry continues to be rolled out nationally with a goal of 100% cover public and private by mid-2019. We have only two DHB’s to sign up and data access and entry increasingly being undertaken centrally in Christchurch. Due to the lead time required for data collection, we are hoping to have meaningful results for urologists this year. Jude Clarke continues to provide excellent leadership and management of this project.

The 2019 NZ ASM will be in Christchurch, with a focus on female and functional urology. Jane MacDonald and Sharon English are co-convenors.

Western Australia

Jeff Thavaseelan

Dr Elayne Oci convened a successful WA section meeting at Bunker Bay on 5-7 October 2018 with guest speakers Dr Ian Vela and Dr Andre Westenberg. USANZ Vice-President Stephen Mark attended and addressed the attendees on Sunday morning.

Attendance numbers were pleasing, and it was great to see representation from other disciplines including Oncology, Radiation, Pathology and Radiology.

The scientific content was excellent culminating in a multidisciplinary panel discussion of some challenging oncology cases. Ms Martine Perret, a photo-journalist, presented the Tony Low Oration. Ms Perret covered UN peacekeeping missions in conflict zones worldwide; her photographs from those visits and her other amazing experiences were captivating.

As always, the weekend’s social events gave everyone including our members, their families, registrars, nurses and trade representatives a fantastic opportunity to catch up. The Saturday night dinner held at Wise Winery corresponded with Mad Hatters Day and saw a vast array of fabulous headwear as well as gourmet food, great wine, and an entertaining quiz competition.

WA hosted Trainee Week 2018 at the Esplanade Hotel in Fremantle between 18 and 22 November. Dr Jenny Kong, our current representative on the Board of Urology, did an excellent job in organising a very successful meeting.

Finally, and most importantly, congratulations to our trainees Sarah O’Neill and Alarick Picardo who successfully passed their Fellowship exam in 2018.
Australasian Urological Foundation

Michael Rochford, Chair

Reporting Activities During 2018

The financial position of the Foundation is secure and has remained stable throughout 2018. The ACNC has accepted the Foundation as a Registered Charitable Organisation. The ATO has also declared that donations to the Foundation are Tax Deductible.

Travel Grants

Five grants of $5,000 each were awarded in 2018 for 2018-2019 to the following urologists:

- Shoo Lui
- Sum Sum Lo
- Kara McDermott
- Weranja Ranasinghe
- Jurgen Westra

Keith Kirkland and Villis Marshall Awards

The AUF sponsored these awards at $2,500 each presented at the 2018 ASM in Melbourne.

The recipients were:

- Marcus Handmer
- Keith Kirkland
- Villis Marshall

The AUF will sponsor these prizes at $2,500 each to be awarded at the 2019 ASM in Brisbane.

Group Membership of SIU

The Foundation has agreed with the Board of the SIU to fund Group Membership of all members of USANZ for three years commencing January 2019. AUF will announce the final mechanism for application in 2019. Due to Privacy Laws relating to personal data each urologist will need to make an individual application. Urology Trainees are already SIU members and take part in SIU Academy Educational exercises. Membership is also open to Senior Members of USANZ.

Financial Statements

The Financial Statements to 31 December 2018 are still in preparation.

Available Funds as at 31 December 2017 was $3,030,000.

The Board would like to thank all members who make donations to the Foundation, which are for the benefit of all members of the Society.

The present directors of the Trust are:

- M.J. Rochford (Chairman), W.J. Lynch (Secretary-Treasurer), S. Ruthven, D. Winkle, H. Woo, S. Mark and P. Heathcote

USANZ Prizes and Awards

Keith Kirkland and Villis Marshall Awards

These awards are presented for the best presentations by SET Urology trainees in the Keith Kirkland/Villis Marshall session at the Annual Scientific Meeting. The Keith Kirkland Award is for the best presentation of research undertaken in a clinical environment, and the Villis Marshall Award is for the best presentation of research undertaken in a full-time academic/scientific environment. The awards consist of a cash prize of $1,000 from USANZ and an AUF Travelling Fellowship to the value of $2,500 to present their work overseas.

Alban Gee Award

This award is for the best poster presentation by a USANZ Member (including SET Urology Trainees) at the Annual Scientific Meeting. The award consists of a cash prize of $500 from USANZ.

BAUS Trophy

USANZ awards this trophy for the Best Scientific Podium presentation by a Full Member of USANZ at the Annual Scientific Meeting. The recipient’s name is engraved on the BAUS Trophy alongside the names of all previous BAUS prize recipients. The award also includes complimentary registration to attend the BAUS Annual Meeting the following year.

Low-Arnold Award in Female and Functional Urology

This award is for the Best Podium or Poster Presentation in the field of Female or Functional Urology presented at the meeting by a Full Member of USANZ. The award consists of a $1500 cash prize provided by the 2018 sponsor Allergan.

Platinum Trophy

The Platinum Trophy is for the Best Endeavour presented by a Full Member of USANZ. The prize includes a Trophy and free registration for the USANZ Annual Scientific Meeting the following year. In 2018 AbbVie sponsored this award.

Young Investigator Award

This new award in 2018 was presented to the Principal Investigator of a paper presented at the 2018 ASM in the field of functional and female urology and was a cash prize of $10,000 generously donated by Astellas.

Christchurch Medal Award

USANZ introduced the Christchurch Medal to recognise urologists who demonstrated outstanding acts for the benefit of others immediately following the devastating earthquake on 22 February 2011 in Christchurch, New Zealand. The criteria are:

a) Christchurch Medal Bravery Award for acts of bravery in hazardous circumstances, where the nominee risked personal injury and/or death to save the life or render assistance to someone in need.

b) Christchurch Medal Community Service Award in recognition of urologists who have given exceptional community service, where the nominee has substantially contributed to the improvement of the quality of life of members of a community through humanitarian endeavours.

2018 Award Winners

Keith Kirkland Award

Marcus Handmer

Villis Marshall Award

Weranja Ranasinghe

Alban Gee Award

Ania Sliwinski

BAUS Trophy

John Yaxley

Low-Arnold Award in Female and Functional Urology

Amanda Chung

Astellas Young Investigator Award

Nadya York

USANZ 2018 ASM in Christchurch Medal

Platinum Trophy

Audrey Wang

Platinum Trophy

Amanda Chung

USANZ 2018 ASM in Christchurch Medal
Agenda
72nd Annual General Meeting of the Urological Society of Australia and New Zealand, to be held at 4.15 pm, Saturday 13 April 2019 in Room M2, Brisbane Convention & Exhibition Centre, South Bank, Queensland, Australia.
1. Present
2. Apologies
3. Minutes of the 71st Annual General Meeting held at 4.15pm on Saturday 24 February 2018 at the Melbourne Convention Centre, Melbourne, Victoria.
4. Business arising from the minutes
5. President’s Report
6. Chief Executive’s Report
7. Secretary’s Report
8. Treasurer’s Report
9. Annual reports of the Society
   9.1 Board of Urology (Stuart Philip)
   9.2 Continuing Professional Development (Peter Heathcote)
   9.3 Royal Australasian College of Surgeons (Mark Frydenberg)
   9.4 Annual Scientific Meeting 2018 (Nathan Lawrentschuk)
   9.5 Annual Scientific Meeting 2019 (Peter Burke)
   9.6 Annual Scientific Meeting 2020 (Jerard Ghosein)
   9.7 Australasian Urological Foundation (Michael Rochford)
10. General business

Minutes of the 71st Annual General Meeting of the Urological Society of Australia and New Zealand held at 4.15pm on Saturday 24 February 2018 in Room 213, Melbourne Convention Centre, Melbourne, Vic, Australia

1 Present

Proxies:
Venu Chalasani gave his proxy to the Chair, Alex Wood gave his proxy to Mark Frydenberg.

In attendance:
M. Nugara (CEO), N. Danes (COO), V. Parkinson, (CFO), D. Klein (E&TM), M. Bennison (GSC - Minutes).

2 Apologies
Venu Chalasani, Alex Wood, Lawrence Hayden, Kim Moretti.

3 Welcome
The Chair declared the meeting opened at 4.25pm.

Quorum
“No business shall be transacted at any general meeting unless a quorum of members is present in person which shall not be less than 5% of all Full Members of the USANZ.”

There being greater than the requisite 5% of all Full Members and Fellows present, the meeting was declared quorate. (As at 24 February 2018, the number of Full Members of USANZ totalled 562. Therefore at least 29 members were required to be present to achieve a quorum).

Eligibility to Vote
All current financial Full Members and Fellows of the Society are eligible to vote at the Urological Society of Australia and New Zealand’s Annual General Meeting.

Declaration of Conflict of Interest
“Any member who has a direct or indirect pecuniary or non-pecuniary interest in a matter being considered, or about to be considered at the Annual General Meeting shall, as soon as practicable after the relevant facts come to the member’s knowledge, disclose the nature of that interest.”

The Chair must cause the declaration to be recorded in the Minutes of the meeting.

A member who has a conflict of interest in a matter must not be present during any deliberations on the matter and is not entitled to vote on the matter.”
4 Minutes from the previous Annual General Meeting

Resolution:
That the minutes of the 70th Annual General Meeting held on Friday 24 February 2017 at the Menzies Room, National Convention Centre, Canberra ACT be approved as a true and accurate record of the meeting.

Moved: Stephen Mark  Seconded: Karen McKertich  CARRIED

5 Business Arising from the Minutes

Nil

6 President’s Report

The President’s report was taken as read. Peter Heathcote, President, highlighted the key points from his report on work undertaken during the year noting the increased focus on improving governance, including the development of a Board Charter and a Strategic Plan, which Michael Nugara will present following the ANZAUS AGM.

He reported that one of the major developments had been the work to improve communication with Sections. The Leadership Group, with the help of Karen McKertich and Mohamed Khadra, attended all Section meetings. He noted that an ongoing project would be to clarify the structure of the Sections/Board communication. This year will be the first year at the ASM that an inaugural meeting of Section Chairs will take place. This will take place annually at the ASM, and possibly with a telephone conference mid-year, to try and improve communications with Sections which are the grassroots face for members.

Peter also reported that the engagement with the Prostate Cancer Foundation would continue, largely led by Mark Frydenberg. Following the issues surrounding RACS release of the Variance Report, the Board was also looking at better presentation and censoring of that data. USANZ is meeting with Medibank Private separately and hopes to meet with other institutions that hold this data to ensure we have input and influence in the data standards and use.

Peter also spoke about the Special Advisory Group (SAG) structure. This year in particular, with the Senate Inquiry into Mesh, the contributions by FUSAG and the Mesh Subcommittee were outstanding. He also acknowledged and thanked all SAGs for their work and advice during the year.

There were no questions from the floor on the President’s Report.

7 Chief Executive Officer’s Report

Michael Nugara, CEO, spoke to the written CEO report. He reported on the success of the 2017 ASM and acknowledged the efforts of Nathan Lawrentschuk and Shomik Sengupta. He further reported that the Functional Urology Symposium conducted in July 2017 showed continued growth in interest and attendance due to the work of Convenors Henry Woo and Vincent Tse.

Michael advised that a considerable amount of work was done during the year to improve the governance of the Society changing the structure of Board reporting, and meetings had been introduced to focus more on strategic rather than operational matters. One of the initiatives had been the development of a Board Charter to provide clarity for Directors on their roles, responsibilities and authorities.

He also advised that the Board approved the procurement of a new member management system. A great amount of work was undertaken evaluating the marketplace to determine suitable platforms. The existing system has been in place for many years and is cumbersome. When implemented members will enjoy greater functionality and it is expected there will efficiency gains through the reduction of duplicated functions.

There were no questions for the CEO from the floor.

8 Secretary’s Report

Mark Frydenberg, Honorary Secretary, spoke to the written report outlining the membership movements during 2017. The report was taken as read.

There were no questions from the floor.

Resolution:
That the Secretary’s report be accepted.

Moved: Neil Smith  Seconded: Mohamed Khadra  CARRIED

9 Treasurer’s Report

Michael Nugara, CEO, spoke to the Treasurer’s report advising that USANZ underwent the usual audit process and received an unqualified audit. He further reported that the surplus of $589K for the year to 31 December 2017, was marginally lower than the 2016 result of $598K.

Revenues remained strong and increased by 3%, primarily due to the biennial Functional Urology Symposium (FUS). Overall expenses increased by approximately 3.7%. Key contributors to this increase were the FUS; an increase in the members’ uptake of the member benefits; and increased engagement of consultants for work such as the governance project. The balance sheet continues to be healthy and total assets were $14.4m.

Questions from the floor

Neil Gordon raised the following:
- Queryed that USANZ had reached $14m in assets and that there had been no indication of how the funds would be used. He highlighted the amount paid by members for USANZ and RACS fees and the payments for attending meetings as an outrageous amount that increases yearly. He proposed that those who had been members for more than 25 years, pay $1 membership and that the cost of the meetings should decrease. He noted that the fear that sponsorship will reduce hadn’t eventuated and that, even if it did, there were adequate reserves to manage it.
- Proposed that the Society establish an Academic arm where research and development are paid for out of the $14m.
MINUTES

- The need for some direction and financial planning on what to do with this organisation.
- That the amount of fees paid to RACS is high, without much benefit. He suggested that perhaps USANZ could pay them to do the CPD and USANZ could do the rest.

Peter Heathcote responded to the points raised as follows:
- Currently, USANZ has free Senior Membership for those who have been members more than 30 years to recognise prolonged service and contributions to the Society. If 30 years is considered to be too long, propose something through the Board for consideration at the next year’s meeting.
- In terms of the Academic comment, at yesterday’s Board of Directors meeting, we resolved to explore an academic structure within USANZ. The terms of reference, their roles and responsibilities need to be determined. The comment was taken on board.
- Regarding RACS, he noted that the new President John Batten and CEO Mary Harney were engaging more strongly with specialties. It seems that there is a willingness to implement some structural changes.
- Re corpus, at the August 2017 Board of Directors meeting, a Strategy day was held where USANZ’s strategic decision to maintain a corpus of approximately five years expenditure was reinforced. Dwindling sponsorship is a worldwide phenomenon highlighted in a recent meeting with the AUA who have been operating in the red for the last three years. Audits are one reason for this as they are a significant financial drain on organisations. He also reported that the Board had established an Investment Committee, so the funds are not sitting as cash in the bank but are invested in conservative funds. The Board is open to start looking at reduced registration fees or member fees, once USANZ reaches the 5-year balance in the corpus. In response to another question from the floor, Peter clarified that five years expenses were currently $20m.

In relation to the RACS fees, Mark Frydenberg also commented that CPD is becoming increasingly important as regulators seek more data about outcomes. He also said that members should be aware that the Board of Urology is a function of RACS and that USANZ provides the training service on behalf of RACS. RACS bears the risks involved and, if USANZ were to take it on, they would also have to cover increased insurance costs. Securing the insurance has been very difficult for RACS and, were USANZ to take it on, it would also have to take on expensive insurance with huge excesses for every claim made. He noted that the Orthopaedic Association was a society that came close to moving away from RACS but is now more closely aligned, partly because of the risks involved.

Mark Frydenberg spoke to the RACS report and the big issue during the year of the Variance Report which was less than satisfactorily handled by the College from a process point of view. He noted that, although there was a negative reaction from some members about engaging with RACS, it is important for USANZ to be engaged with the holders of the big data sets, including government, to influence outcomes and protect urologists that are doing a good job. He noted that ENT has withheld their report following our example.

He also reported that the Minister had convened an Out of Pocket Expenses Committee which will also be tied into outcome measures.

Resolution:
That the reports be taken as read and accepted

Moved: Stephen Ruthven
Seconded: Prem Rashid

CARRIED

11 Special Resolution

Peter Heathcote spoke to the proposed resolution to amend the USANZ Constitution.

He reported many of the amendments were intended to simplify membership to improve administrative processes, for example by enabling membership changes such as those going overseas, to be processed without the requirement of the approval of the Board of Directors. Mark Frydenberg noted that several other changes had been proposed to ensure the wording used in the report reflected current practice and position titles.

Resolution:
That the Society’s existing constitution be modified in accordance with the amendments marked-up and set out in Annexure A of the notice of Annual General Meeting, and otherwise in accordance with the explanatory memorandum.

Moved: Mark Frydenberg
Seconded: Peter Heathcote

Vote: In Favour: 43, Against: Nil

CARRIED

11 General Business

AUA Educational Program

John Kourambas requested clarification concerning the AUA Educational Program and financial arrangements. Peter Heathcote advised that a meeting had been held with the AUA this morning and that there has been a significant change to the arrangement. He reported that over the last 3-4 years, John had offered trainees an excellent Endourology program, that had enabled USANZ also to offer AUA membership to the trainees. He reported that as of this meeting the arrangement has expired, and at present, there are no plans to hold any AUA sponsored Endo meetings as both the BoU and USANZ Board feel that the education can be continued as part of the training program.

Peter also reported that AUA membership is considered valuable for trainees and this will be canvassed as part of the member benefit survey to be conducted later in 2018. He urged members’ participation in that survey to ensure their funds are spent effectively and appropriately.

Michael Nugara advised that the funds were paid by the sponsor directly to the AUA.

Peter Heathcote thanked members for attending the meeting.

Meeting closed 4.53pm

Resolution:
That the Treasurer’s report be accepted.

Moved: Neil Gordon
Seconded: Finlay Macneill

CARRIED